

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_.

Please return this form to Sharon Lemieux at [sclemieu@arb.ca.gov](mailto:sclemieu@arb.ca.gov) by fax at (626) 459-4480

### FLEET INFORMATION FORM

Form is also available on-line at <http://www.arb.ca.gov/msprog/publicfleets/publicfleets.htm>

Agency Name: \_\_\_\_\_ Parent Company Name: \_\_\_\_\_ Carrier ID#: \_\_\_\_\_

Company Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Contact Title: \_\_\_\_\_

Tel: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

1. Are you a:

☐ Private Fleet ☐ Government Fleet ☐ Government-Contracted Fleet

2. How would you describe your business or activity sector?

☐ Trucking-Motor Carrier ☐ Trucking-Owner/Operator ☐ Agriculture

☐ Commercial ☐ Construction ☐ Industrial

3. How many locations do you operate from? \_\_\_\_\_

4. In which California counties do you operate? \_\_\_\_\_

5. What is your on-road heavy-duty (8,500 lbs. GVWR and above) fleet size for all locations combined? \_\_\_\_\_

6. What is your off-road heavy-duty (50 HP and above) fleet size for all locations combined? \_\_\_\_\_

7. How do you typically acquire your equipment?

☐ Purchase new ☐ Purchase used ☐ Lease ☐ Rent

8. Fill out the following table for each of your fleet locations

Terminal ID #	Address	City	State	Zip Code

9. Where do you refuel your equipment? Please check all that apply.

☐ Fleet-owned Station ☐ Job-site Fueling Service (Wet-hosing) ☐ Retail/Truck Stop ☐ Other, Fill in: \_\_\_\_\_

10. Do you currently have access to Ultra Low Sulfur Diesel fuel (< 15ppm sulfur)?

☐ Yes ☐ No

For ARB Use Only: Survey #: \_\_\_\_\_ Date Received: \_\_\_\_\_ Entered by: \_\_\_\_\_ Date Entered: \_\_\_\_\_

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11. What percentage of your vehicles/equipment operates solely in California and what percentage also operates outside of California?

Only within California: \_\_\_\_ %      Also outside of California: \_\_\_\_ %

12. What would you consider as an incentive to retrofit your vehicles/equipment with low-emission devices before they are required? Please check all that apply.

☐ Green image      ☐ Government Grants      ☐ Tax Incentives, Explain: \_\_\_\_\_ ☐ Other, Fill In: \_\_\_\_\_

**Please fill out the table in accompanying file "ARB heavy-duty vehicle survey form.xls" with an entry for each vehicle/equipment in your fleet. See the next page for table header explanations. Please make copies as necessary.**